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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: GF&A Realty LLC		
	Name of Limited L	iability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	d Office Change and	fee(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to the	following:
Tara Morgan		
Name of Person		
GF&A realty LLC		
Firm/Company		<del></del>
163 Persimmon Road		
Address		<del>_</del>
Sopehoppy, Fl 32358		
City/State and Zip Co	ode	<del></del>
tara@GFaproperty.com		
E-mail address: (to be used for futur	e annual report notif	fication)
For further information concerning this m	atter, please call:	
Tara Morgan	850 at (	695-1001
Name of Person		Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the follo	wing amount:	
☑ \$25 Filing Fee	□ \$	555 Filing Fee & Certified Copy
INHS18 (2/14)		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

. Na	ame of the limited liability company:  GF&A Realty LLC	Ĵ			
. (a)	163 Persimmon Road		(b) 163 Persimmon Road		
. (-)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	(0)	М	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Sopchoppy, FL 32358		Sop	echoppy,	FL 32358
	04/16/2019	_	 L190	0001042	87
	Date of filing/registration in Florida	- 4.		Γ	Document number
. (a)	United States Corporation Agents, Inc.				
. (u)	Registered Agent and Registered Office shown on the records of t 5575 S Semoran Blvd, Suite 36	the Flor	rida Dept	. of State:	
	Registered Office Address (MUST BE FLORIDA STREET A	<u>(DDRE</u>	ESS)		
		32822	!		2028 HAY
(b)	Matthew Morgan				923 I
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>Office</u>	address	:	AH II: I
	163 Persimmon Road				ORIGINAL TO A STATE OF THE STAT
	NEW Registered Office Address:				7
	Sopchoppy	32358	;		
hango gent v /as/w/	imited liability company is not organized under the law c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	regist bility of the l	ered of compar limited	fice and ny, it is liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
-Signa	ture of a member or authorized representative of a member	_	<u>Ta</u>	ra	Printed or typed name of signee
l here provisi he obi o mer potifie la	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had inwriting of this change.	ee to d perfor l for it tereby			
//U Signatu	re of Registered Agent				